

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. <u>10656133</u>	FILING DATE <u>09-08-03</u>					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT								
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP
1	/		/				51						
2		/		/			52						
3		/		/			53						
4		/		/			54						
5		/		/			55						
6		/		/			56						
7		/		/			57						
8		/		/			58						
9		/		/			59						
10		/		/			60						
11		/		/			61						
12		/		/			62						
13		/		/			63						
14		/		/			64						
15		/		/			65						
16		/		/			66						
17		/		/			67						
18		/		/			68						
19		/		/			69						
20		/		/			70						
21		/		/			71						
22	/		/				72						
23		/		/			73						
24		/		/			74						
25		/		/			75						
26		/		/			76						
27		/		/			77						
28		6		6			78						
29	/		8	/			79						
30	/		/				80						
31		/	/	/			81						
32		/	/	/			82						
33		/		/			83						
34		/		/			84						
35		/		/			85						
36		/		/			86						
37			/				87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	4		3				TOTAL IND.						
TOTAL DEP.	37		37				TOTAL DEP.						
TOTAL CLAIMS	41		40				TOTAL CLAIMS						